

DO/ED BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 807011 RECEIPT DATE: 04 / 06 / 01
IA NUMBER: PCT/ FR99 / 02426 IA FILING DATE: 10 / 08 / 99
FAMILY NAME: LETELLIER DELAY WAIVED (Y/N): Y
GIVEN NAME: PHILIPPE DEMAND RECEIVED (Y/N): Y
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 10 / 08 / 98
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: PF980068 COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000
FAX

NAME: MR JOSEPH S TRIPOLI

STREET: P O BOX 5312

CITY: PRINCETON

STATE/COUNTRY: NJ ZIP: 08540

EMAIL:

APPLICATION TITLES:

APPLICATIONS MANAGER VARIABLE MANAGEMENT INSTRUCTION SET

TAB TO LAST POSITION, PUSH SEND